PTO/SB/30 (01-08)

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Request	Application Number	10/594,928-Conf. #5779	
for	Filing Date	September 29, 2006	
Continued Examination (RCE)  Transmittal	First Named Inventor	Jin-Woo Lee	
Address to:	Art Unit	2821	IVED
Mail Stop RCE Commissioner for Patents	Examiner Name	T. Ho AUG 12	2008
P.O. Box 1450 Alexandria, VA 22313-1450	Attorney Docket Number		14000
This is a Request for Continued Examination (RCE) under Request for Continued Examination (RCE) practice under 37 CFR 8, 1995, or to any design application.	r 37 CFR 1.114 of the above	e-identified application.	TITION
<ol> <li>Submission required under 37 CFR 1.114 Note: If amendments enclosed with the RCE will be entered in the applicant does not wish to have any previously filed unente amendment(s).</li> <li>a. Previously submitted. If a final Office action may be considered as a submission even if</li> </ol>	order in which they were filed usered amendment(s) entered, apon is outstanding, any amend	nless applicant instructs otherwise. If plicant must request non-entry of such	
i. Consider the arguments in the Appeal B	rief or Reply Brief previously	filed on	
ii. Other			
b. x Enclosed	<b></b>		
i. Amendment/Reply ii	i. X Information Disclosu	re Statement (IDS)	
ii Affidavit(s)/Declaration(s) iv	/. Other		
2. Miscellaneous			
a. Suspension of action on the above-identifie	d application is requested u	nder 37 CFR 1.103(c) for a	
period of months. (Period of su	spension shall not exceed 3 mi	onths; Fee under 37 CFR 1.17(i) required)	
b. X Other Petition to Withdraw From Iss	ue Under 37 CFR 1.31	3(c)	
3. Fees The RCE fee under 37 CFR 1.17(e) is require	d by 37 CFR 1.114 when the	RCE is filed.	
<ul> <li>a. X The Director is hereby authorized to charge overpayments to Deposit Account No.</li> <li>i. X RCE fee required under 37 CFR 1.17(expression)</li> </ul>	22-0261 . I have encl	erpayment of fees, or credit any osed a duplicate copy of this sheet.	
	•		
ii. Extension of time fee (37 CFR 1.136 and	F1.17)		
iii. X Other \$130 Petition Fee			j
b. Check in the amount of \$	enclosed		
c. Payment by credit card (Form PTO-2038 end WARNING: Information on this form may become public. Credit card information and authorization on PTO-2038.	•	ot be included on this form. Provide	
SIGNATURE OF APPLICANT,			_
	ATTORNEY, OR AGENT	REQUIRED	
Signature All Control	ATTORNEY, OR AGENT	August 12, 2008	

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL				10/594,928-Conf. #5779					
				September 29, 2006					
				Jin-Woo Lee		RECEIV			
	For FY 20	008		Examiner Name	<del></del>	T. Ho		REVELY	
X Applicant of	claims small entity state	is See 37 CFR 1.2	<b>)7</b>			2821			
<del></del>				Art Unit	-			AUG 121	00
TOTAL AMOUNT (	OF PAYMENT	(\$) 535.00		Attorney Docket	No.	31656-23691	/		
METHOD OF F	PAYMENT (check	all that apply)					OFF	CE UF PE	IT
Check	Credit Card	Money Order	No	ne Other	(please ident	ify):			
X Deposit Acco	ount Deposit Account N	lumber: 22	-0261	Deposit	Account Nan	ne:V6	enable LLF	) 	
For the at	bove-identified depo	sit account, the D	Director is	hereby authorize	ed to: (che	eck all that apply	)		
	arge fee(s) indicated				·	ndicated below, e		he filing fee	
			rmonte e	, <u> </u>			, acope to t		
	erge any additional f s) under 37 CFR 1.		ments o	<sup>T</sup> X Credit	any over	payments			
FEE CALCULA	ATION		-	·					
1. BASIC FILING	, SEARCH, AND E	CAMINATION FE	ES						
	FII	ING FEES	SEA	ARCH FEES	EXAMI	NATION FEES	3		
Application Typ	e Fee (\$	Small Entity Fee (\$)	Fee (\$	Small Entity	Foo (\$)	Small Entity	Foos I	Paid (\$)	
Utility	310	155	510	) <u>Fee (\$)</u> 255	Fee (\$) 210	Fee (\$) 105	reesi	Paid (\$)	
Design	210	105	100	50					
Plant	210	105		į	130	65		···	
			310	155	160	80			
Reissue	310	155	510	255	620	310			
Provisional	210	105	0	0	0	0			
2. EXCESS CLAII	M FEES						Fee (\$)	Small Entity Fee (\$)	
Fee Description  Fach claim over 2	20 (including Reiss	1ec)					50		
	claim over 3 (inclu	•					210	25 105	
Multiple depende		iding recissoos)					370	185	
Total Claims	Extra Claims	Fee (\$)	Fee F	Paid (\$)	N	<u>fultiple Depend</u>			
	20 = x	=	1001	μια (ψ)			Fee Paid (		
<del></del>	er of total claims paid for,			<del></del>	<u>-</u>	<u>cc.147</u>	r co r aia (	4	
Indep. Claims	Extra Claims	Fee (\$)	Fee F	Paid (\$)			,		
	3 = X	=							
HP = highest numbe	er of independent claims	paid for, if greater that	an 3.						
3. APPLICATION	SIZE FEE								
If the specification	on and drawings ex	ceed 100 sheets	of paper	(excluding electr	onically f	filed sequence or	computer		
listings under	· 37 CFR 1.52(e)), t	he application siz	ze fee du	e is \$260 (\$130 f	for small e	entity) for each a	dditional 5	0	
	tion thereof. See 3								
<u>Total Sheets</u>	Extra Sheets		of each a	dditional 50 or frac			Fee	Paid (\$)	
<del></del>	- 100 =	/50 =		(round up to a who	ole number)	x	=		
4. OTHER FEE(S)		11						Paid (\$)	
· ·	e \$130 fee (no sma	•						30.00	
Other (e.g., lat	e filing surcharge):	2801 Request	tor cont	inued examina	tion (RCI	E) (see 37	40	05.00	
SUBMITTED BY									
Signature	CathiM	belle		Registration No. (Attorney/Agent)	33,074	Telephone	(202) 34	4-4000	
Name (Print/Type) (	Catherine M. Vooi	hees				Date	August 1	2, 2008	

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